Inpatient Data Elements (OSHPD Proprietary Standards)	ED and AS Data Elements (National Standards)
Type of Care – 1 digit – numeric  1 = Acute 3 = Skilled Nursing/Intermediate Care 4 = Psychiatric 5 = Chemical Dependency 6 = Physical Rehabilitation	Not Applicable  The files for ED and AS records will be submitted separately.
Hospital Identification Number – 6 digits – numeric OSHPD assigned number	Facility Identification Number – 6 digits – numeric OSHPD assigned number
Abstract Record Number – 12 digits – alphanumeric  Facility assigned number for retrieval and correction	Abstract Record Number – 12 digits – alphanumeric  Facility assigned number for retrieval and correction
Patient's Social Security Number – 9 digits – numeric  Patient's own SSN  Unknown SSN = 000000001	Patient's Social Security Number – 9 digits – numeric  Patient's own SSN Unknown SSN = 000000001
Date of Birth – 8 digits – numeric  mmddccyy = for online file submission mmddccyy = for web entry record Unknown date = estimate year, 00 for month, 00 for day	Date of Birth – 8 digits – numeric  ccyymmdd = for online file submission mmddccyy = for web entry record Unknown date = estimate year, 01 for month, 01 for day

Inpatient Data Elements (OSHPD Proprietary Standards)	ED and AS Data Elements (National Standards)
Sex – 1 digit – numeric  1 = Male 2 = Female 3 = Other 4 = Unknown	Sex – 1 digit – alpha  M = Male F = Female U = Unknown
ZIP Code – 5 digits - alphanumeric  Patient's residence, first five digits If city is known, partial ZIP Code acceptable with first three known digits and the last two digits as 00 XXXXX = Unknown ZIP Code YYYYYY = Foreign ZIP Code ZZZZZ = Homeless ZIP Code	ZIP Code – 5 digits - numeric  Patient's residence, first five digits 99999 = Unknown ZIP Code
Race – 1 digit – numeric  1 = White 2 = Black 3 = Native American/Eskimo/Aleut 4 = Asian/Pacific Islander 5 = Other 6 = Unknown	Race – 2 digits – alphanumeric  R1 = American Indian or Alaska Native R2 = Asian R3 = Black or African American R4 = Native Hawaiian or Other Pacific Islander R5 = White R9 = Other Race 99 = Unknown (report to OSHPD if race is unknown)

Inpatient Data Elements (OSHPD Proprietary Standards)	ED and AS Data Elements (National Standards)
Ethnicity – 1 digit – numeric  1 = Hispanic 2 = Non-Hispanic 3 = Unknown	Ethnicity – 2 digits – alphanumeric  E1 = Hispanic or Latino E2 = Non-Hispanic or Non-Latino 99 = Unknown (report to OSHPD if ethnicity is unknown)
Admission Date – 8 digits – numeric  mmddccyy = for online file submission mmddccyy = for web entry record	Service Date – 8 digits – numeric  ccyymmdd = for online file submission mmddccyy = for web entry record
<u>Discharge Date</u> – 8 digits – numeric  mmddccyy = for online file submission mmddccyy = for web entry record	Not Applicable
Principal Diagnosis – 5 digits – alphanumeric ICD-9-CM code	Principal Diagnosis – 7 digits – alphanumeric ICD-9-CM code
Other Diagnosis – 5 digits – alphanumeric  ICD-9-CM codes  Up to 24 other diagnoses	Other Diagnosis – 7 digits – alphanumeric  ICD-9-CM codes  Up to 24 other diagnoses

Inpatient Data Elements (OSHPD Proprietary Standards)	ED and AS Data Elements (National Standards)
Principal Diagnosis Condition Present at Admission – 1 digit – alpha  Y = Yes N = No U = Uncertain	Not Applicable
Other Diagnosis Condition Present at Admission – 1 digit – alpha  Y = Yes N = No U = Uncertain	Not Applicable
External Cause of Injury - 5 digits – alphanumeric  ICD-9-CM codes using the E-codes  Principal and four other external causes of injury, including place of occurrence = total of 5 causes	Principal External Cause of Injury – 7 digits – alphanumeric  ICD-9-CM code using the E-codes  Principal external cause of injury

Inpatient Data Elements (OSHPD Proprietary Standards)	ED and AS Data Elements (National Standards)
See previous page for External Cause of Injury	Other External Cause of Injury – 7 digits – alphanumeric  ICD-9-CM codes using the E-codes Up to 4 <b>other</b> external causes Other external causes of injury, including place of occurrence
Principal Procedure – 4 digits – alphanumeric ICD-9-CM code	Principal Procedure – 5 digits – alphanumeric  CPT-4 code
Principal Procedure Date – 8 digits – numeric  mmddccyy = for online file submission mmddccyy = for web entry record	Not Applicable
Other Procedures – 4 digits – alphanumeric  ICD-9-CM codes Up to 20 other procedures	Other Procedures – 5 digits – alphanumeric  CPT-4 codes Up to 20 other procedures
Other Procedure Dates – 8 digits – numeric  mmddccyy = for online file submission mmddccyy = for web entry record	Not Applicable

Inpatient Data Elements (OSHPD Proprietary Standards)	ED and AS Data Elements (National Standards)
Prehospital Care and Resuscitation (DNR Order) – 1 digit – alpha	Not Applicable
Y = Yes N = No	
Total Charges – 7 digits – numeric  Based on hospital's full established rates Exclude hospital-based physician fees Whole dollars only Rounded to the nearest dollar No charges = \$1 0000000 – 9999999 If more than 365 days, total charges for final 365 days are to be reported.	Not Applicable
Type of Admission – 1 digit – numeric  1 = Scheduled 2 = Unscheduled 3 = Infant, under 24 hours old 4 = Unknown	Not Applicable

Inpatient Data Elements (OSHPD Proprietary Standards)	ED and AS Data Elements (National Standards)
Source of Admission – see breakdown below:	Not Applicable
Site – 1 digit – numeric  1 = Home  2 = Residential Care Facility  3 = Ambulatory Surgery  4 = Skilled Nursing/Intermediate Care  5 = Acute (Inpatient) Hospital Care  6 = Other (Inpatient) Hospital Care  7 = Newborn  8 = Prison/Jail  9 = Other	
Licensure of Site – 1 digit – numeric 1 = This Hospital 2 = Another Hospital 3 = Not a Hospital	
Route of Admission – 1 digit – numeric 1 = Your Emergency Room 2 = Not Your Emergency Room	

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(OSHPD Proprietary Standards)	(National Standards)
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<u>Disposition of Patient</u> – 2 digits – numeric	<u>Disposition of Patient</u> –2 digits – alphanumeric
	(All codes and descriptions are different from IP.)
	(Selected national standards applicable to ED and AS settings)
01 = Routine discharge 02 = Acute care within this hospital	<b>01</b> = Discharged to home or self care (routine discharge)
03 = Other type of hospital care within this hospital 04 = Skilled nursing/intermediate care within this	<b>02</b> = Discharged/transferred to another short term general hospital for inpatient care
hospital 05 = Acute care at another hospital	<b>03</b> = Discharged/transferred to skilled nursing facility (SNF)
06 = Other type of hospital care at another hospital (not skilled nursing/intermediate care)	<b>04</b> = Discharged/transferred to an intermediate care facility (ICF)
07 = Skilled nursing/Intermediate care elsewhere 08 = Residential care facility	05 = Discharged/transferred to another type of institution for inpatient care
09 = Prison/Jail 10 = Against medical advice	<b>06</b> = Discharged/transferred to home under care of organized home health service organization
11 = Died 12 = Home health service	<b>07</b> = Left against medical advice or discontinued care
13 = Other	<b>08</b> = Discharged/transferred to home under care of a Home Intravenous (IV) provider
	<b>20</b> = Expired
	43 = Discharged/transferred to a federal hospital
	<b>50</b> = Discharged home with hospice care
	<b>51</b> = Discharged to a medical facility with hospice care
	61 = Discharged to a hospital-based Medicare approved swing bed

## Comparison of Data Elements for IP, ED, and AS

~ Bold text reflects differences from current IP data collection ~

Disposition o	<u>f Patient</u> -	- 2 digits –	numeric	(continued)
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- **62** = Discharged/transferred to another rehabilitation facility including rehabilitation distinct part unit of a hospital
- **64** = Discharged/transferred to a nursing facility certified under Medicaid (Medi-Cal), but not certified under Medicare
- **65** = Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital
- **00** = Other (report to OSHPD if site is not specified above)

See Expected Source of Payment on the next page.

Inpatient Data Elements (OSHPD Proprietary Standards)	ED and AS Data Elements (National Standards)
Expected Source of Payment – See breakdown below:	Expected Source of Payment – 2 digits – alphanumeric
	(All codes and descriptions are different from IP.)
Payer Category – 2 digits – numeric  01 = Medicare 02 = Medi-Cal 03 = Private Coverage 04 = Workers' Compensation 05 = County Indigent Programs 06 = Other Government 07 = Other Indigent 08 = Self Pay 09 = Other Payer  Type of Coverage – 1 digit – numeric 1 = Managed Care – Knox-Keene or Medi-Cal County Organized Health System 2 = Managed Care – Other 3 = Traditional Coverage  Plan Code Number – 4 digit – numeric Refer to the table of Plan Code Names and Plan Code Numbers effective for the reporting period.	(National standards from 837 Institutional, 837 Professional, and 837 Health Care Service: Data Reporting Guide)  09 = Self Pay 11 = Other Non-federal programs 12 = Preferred Provider Organization (PPO) 13 = Point of Service (POS) 14 = Exclusive Provider Organization (EPO) 16 = Health Maintenance Organization (HMO) Medicare Risk  AM = Automobile Medical BL = Blue Cross/Blue Shield CH = Champus (TRICARE) CI = Commercial Insurance Company DS = Disability HM = Health Maintenance Organization MA = Medicare Part A MB = Medicare Part B MC = Medicaid (Medi-Cal or Medi-Cal Managed Care Plan) OF = Other federal program TV = Title V VA = Veterans Affairs Plan WC = Workers' Compensation Health Claim 00 = Other (report to OSHPD if none of the above apply)

Inpatient Data Format (MIRCal System)	ED and AS Data Format (MIRCal System)
Fixed-length layout for file submission	Fixed length layout for file submission
File Format – 520 spaces	File Format – 382 spaces
Number of data elements – 26	Number of data elements - 17